

United States Department of the Interior Bureau of Land Management Winnemucca District Black Rock Field Office





Individual Trip Plan (A detailed trip plan must be prepared for each separate activity)

Name:			BLM Permit # (Agency Use Only)				
Business Name:							
What commercial service is l	peing provided (i.	e. Hunting, fish	ning, photog	raphy, etc.)			
Are you proposing to set (Please indicate proposed loc			campsites	, blinds, or staging fa	cilities?	□ Yes	□ No
Location (i.e. Maggie cree	Dates of	Use 	BLM, US	SFS, State or Private L	ands? 		
Please describe the type of fa	cilities that would	d be used					
Are you requesting author	orization to can	np for more (than 14 da	ys at one place?		□ Yes	□ No
Location (i.e. Maggie cree	Dates of Dates	Use		SFS, State or Private L	ands?		
What are your primary (check all that apply)	methods of tran	nsportation?			_		
□ Pack/Riding Animal □	ATV/OHV	□ Passenger	Vehicle	□ Hike/Walk			
Master/Sub-guide N	umber of Clien	nts Specie	es	Hunt Unit(s)	_		
I certify that the information acknowledge that I (we) am estipulations that are required false information, or the failus suspension, or revocation of	(are) required to c by the authorized are to keep this Op	comply with required to the complex with required to the complex of the complex o	uirements a he permit is	nd stipulations on Form issued. I further underst	2930-1 and that th	d any addit e provision	ional ı of
Permittee:				Date:			